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ABSTRACT

This manual provides guidelines, practical suggestions, and technical information for conducting a comprehensive child development needs survey, primarily at the county or multi-county level. Included are: (1) general guidelines, (2) a 37-item needs assessment survey form and (3) appendices concerning (a) sample selection, (b) interviewer instructions, (c) publicity for the survey, including sample publicity releases, (d) coding of the data, including the data code book, (e) analysis of the data and (f) report preparation, including a list of tables to be prepared for data presentation. Assessment procedures included in the manual grew out of experience in 3 local surveys. (Author/RE)

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CHILD DEVELOPMENT NEEDS ASSESSMENT MANUAL

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JULY 1975

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CHILD DEVELOPMENT PLANNING PROJECT

MINNESOTA STATE PLANNING AGENCY

NEEDS ASSESSMENT MANUAL

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FOREWARD

This needs assessment manual has been prepared as a result of the activities of many people. The survey form was developed with the input and suggestions of many individuals and groups both at the state and local level.

The procedures for conducting the survey were developed as a result of experiences in three local surveys. The pilot survey in Brown, Nicollet and Sibley counties was conducted under a subcontract with the pilot Human Services Board in that three county area, with Patricia Braun serving as survey coordinator. The survey in Carver County was conducted under subcontract with the Family Services Department with Mary Sullivan and Joyce Laabs coordinating the survey. In Region 5, the sponsor of the survey was the Region 5 Development Commission through the efforts of Robert Benner and the assistance of Kelly Kelzenberg. In all of the areas other individuals and groups cooperated in the survey, many serving on advisory committees. The interviewers also donated considerable time and effort. Anne Grosmann, student intern, helped with the data analysis and the manual.

Most important was the contribution of the over 700 families with young children who were interviewed. Our sincere thanks and appreciation to all the individuals involved.

Gail C. Roberts,
Project Director

GUIDELINES

The purpose of a local child development needs assessment is to determine the needs and problems of young children and their families in a given community. Included in the needs assessment process is the practice of surveying parents of young children, who are the users and potential users of child development services, regarding what services families need and would use if they were made available. A survey methodology has been developed in order to assist communities in assessing the needs of young children and their families.[1] The survey form was designed by the Child Development Planning Project with input from state and local groups and individuals.

A pilot needs survey was conducted through a subcontract with the Human Services Board in Brown, Nicollet and Sibley counties during July and August, 1974. After some minor revisions a second contract was negotiated with the Family Services Department in Carver county for a survey conducted during November and December, 1974 which used alternative sampling strategies and coding procedures. Information (including sample selection, recruitment and training of interviewers, coding and analysis of the data) gained as a result of these two surveys was incorporated into these guidelines.

The survey is designed as a local child development needs assessment aimed primarily at the county or multi-county level. Before a local needs assessment can be undertaken effectively there must be cooperation between local elected officials, agency personnel, providers and users of services, and citizens interested in young children and their families. The formation of a local

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[1] We acknowledge the contribution of other states, particularly the state of Washington, in the development of comprehensive child development needs assessment methodologies.

advisory committee to provide input to the survey and survey process is one way to formalize the cooperation. A local coordinator of the survey should be designated. A community resource person or consultant who is knowledgeable about survey design, data processing and analysis should also be involved. In addition, a listing, inventory or directory of the existing local services and resources would be useful during the survey as well as during the subsequent planning process.

The results of the survey can best be used at the local level for planning, program development and resource allocation. However, if a number of counties throughout the state use the survey in essentially the same form and with standardized procedures then a body of information will be accumulated that can begin to give a picture of the child development needs of the state and how similar or different they are in various communities, counties, areas or regions.

The basic steps in conducting a community needs assessment survey are given below:

1. Revising the survey form. The community must first undertake a careful review of the survey form itself and decide whether to use the questionnaire as it is now designed or whether to add questions that reflect particular local concerns. Questions added at the end of the survey would need to be incorporated into the existing coding system.
2. Sample selection. Valid procedures must be followed in order to select a sample that is representative of the population of families with a child under the age of six in the geographic area involved. In most cases, a county would be the basic geographic unit and families would be selected from the townships of the county in proportion to the total

number of families with a child under the age of six in each of the townships.[2] An appropriate sample size must be determined that will enable the community to draw reasonable inferences about the total target population. About 5% of the target population of families with a child under the age of six should be sufficient.

One method of selecting the sample is to obtain a complete name list of all the families with a child under the age of six in the geographic area and to randomly select the sample from that list in proportion to their distribution by townships. School districts conduct a school census to identify the potential school population. If current school census lists[3] are available by age of the child or with families with a child under six identified, then families can be randomly selected from a list in proportion to their distribution in the geographic area in order to achieve the predetermined sample size.

An alternative sampling procedure is to determine the number of families to be included in the sample for each block, township or other population unit in proportion to the total population under age six in that area.[4] The actual process of selecting the family, is to randomly define a specific house where the interviewer is to begin. The interviewer proceeds door to door until a family with a child under age six is identified. A maximum number of interviewers per block should be set or instructions given to go to every other house. Interviews must be

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[2] In large metropolitan areas, neighborhoods might be designated as the geographic unit and the sample selected using block statistics.

[3] Such data must be current and all inclusive in order to avoid eliminating highly mobile families from the sample.

[4] Two or three adjoining areas can be combined to account for at least 5% of the population under six. This clustering in sparce population areas makes sample selection easier and saves travel time for interviewers.

conducted at various times of the day and evening, including weekends, in order to include working mothers and also fathers in the sample.

Once the sample is selected, or a household identified, every effort should be made to be sure that family answers the survey. If the selected family is not home or is busy the house must be revisited at least twice. (See Appendix A for further details).

3. Selection of the target child. The survey form is designed to be focused on a particular child under age six in a selected family. If a family has more than one child under the age of six, the selection of the target child is made either at the time of the sample selection (if a name list is available) or at the time of the interview by a random process. Focusing the interview on a particular child within the family keeps the interviews a uniform length and simplifies the analysis of the data.
4. Recruitment of volunteer interviewers. After the number of families to be interviewed and the sample selection procedure have been decided, volunteer interviewers can be recruited. The local advisory committee on the needs assessment can be particularly helpful in contacting the groups they represent for potential interviewers. Possible sources for volunteers are: community colleges, 4-C groups, Head Start groups, League of Women Voters, Junior League, Mrs. Jaycees, church groups. The interviewers should be familiar with the areas in which they work. When recruiting interviewers the importance of the task, the standardized procedures, and attendance at training sessions must be stressed. It is easier to recruit interviewers if they can be reimbursed for their expenses at least a minimal amount such as $5 per interview or $1 per hour.

5. Training for interviewers. A training session must be held in order to familiarize the interviewers with the survey questions and interview techniques. The interviewers can "role play" or practice the interviewing in pairs during the training session. Each interviewer is asked to "try" the interviewing and then report back for a follow-up discussion session on any problems they are having. The interviewers are then ready to be assigned families to interview or areas in which to start(depending on the sampling procedure used). Each interview will take, on the average, about one-half hour to complete, once the household has been located and the respondent is available. The interviewers remain in contact with the survey coordinator during the entire interviewing stage. (See Appendix B).

6. Publicity. Citizens in the community should be informed that a needs survey is being planned, the purpose of the survey, who is involved and how the results are to be used. A news release should be prepared for distribution to the local papers. If families are selected from a list, letters can be mailed notifying them of their inclusion in the sample prior to their being contacted by an interviewer. Interviewers should be provided with a letter of introduction from a local official in order to establish their authenticity. (See Appendix C).

7. Coding of the data. The coding process itself is a technical process which will take about one-half hour per survey form. The persons doing the coding must be trained and supervised by the survey coordinator in order to assure uniform procedures and to maintain the accuracy of the data. Using a codebook corresponding to the survey questions, the coding can be done directly in the designated column on the right hand

side of the form. The numerical codes are then transfered to 80 column coding sheets for key punching. Facilities for keypunching are available in most communities. (See Appendix D).

8. Analysis of the data. The questions and the coding system are designed for computer processing. The computer program most appropriate for the job is SPSS (Statistical Package for the Social Sciences). This program is generally available through college or university computing systems. Analysis must include the number and percentage distribution of responses for each question and selected cross-tabulations between questions. Basic cross-tabulations would include breakdowns by family, socioeconomic and age of child variables for each question. (See Appendix B).
9. Interpretation of results. The output from the computer will be in the form of detailed tabulations which will need to be summarized, displayed in the form of tables, interpreted and put into written form that is understandable to those who will be using the results of the needs assessment for local planning. (See Appendix F).

Once the needs assessment survey is complete the community can begin to match identified needs with available resources. Some needs may be met by coordination of existing services, others may be met by the expansion of current programs or the development of new programs. Alternative strategies for meeting needs identified by the survey can be defined and recommendations presented to local officials.

CHILD DEVELOPMENT NEEDS ASSESSMENT

SURVEY FORM

May, 1975

Survey Number _____

Name of Interviewer _____

Date of Interview _____

Name of County _____

Name of City or Township _____

1st Contact _____ Recall _____ NR _____

Prepared by:

Child Development Planning Project
Minnesota State Planning Agency
101 Capitol Square Building
St. Paul, Minnesota 55101

Interview Information:

County _____

Survey Number _____

City or Township _____

Adult responding to this interview is?

Mother _____ Father _____

Marital Status of respondant:

Married _____ Widowed _____ Divorced _____

Separated _____ Never Married _____

Information on Mother (if living in home):

Age _____

Education level _____

Employed? Yes _____ No _____

Hours Employed? _____

Information on Father (if living in home):

Age _____

Education level _____

Employed? Yes _____ No _____

Hours Employed? _____

Total Yearly Family Income:

_____ under $3,999

_____ $4,000 - 6,999

_____ $7,000 - 9,999

_____ $10,000 - 14,999

_____ over $15,000

Age and Sex of all Children in Household:

	Age	Sex		Age	Sex
a.	_____	_____	d.	_____	_____
b.	_____	_____	e.	_____	_____
c.	_____	_____	f.	_____	_____

SELECT TARGET CHILD BY CIRCLING ABOVE

Total number of children under age 18 _____ ___

Total Number of children under 6 _____ _____

Age of Target Child _____ _____

Sex of Target Child

Male _____ Female _____ _____

Birth order of target child

Oldest or only _____ _____

Middle _____

Youngest _____

1. Month of pregnancy mother's prenatal care began?

   _____ ___

2. Number of prenatal visits? _____ ___ ___

   b. Where was prenatal care obtained?

   _____ private physician ___

   _____ Clinic or public health facility

   _____ Other; Specify _____

3. Did the mother attend any prenatal classes (for this child)? ___

   Yes _____ No _____; If yes, how many _____ ___

4. Did the baby come at expected time of delivery:

   Yes _____ No _____; if no, early _____ late _____ ___

5. Did the mother have any difficulty during labor and/or delivery?

   Yes _____ No _____ ___

6. What was the child's birth weight _____ ___

7. What was the mother's age at time of child's birth? _____ ___

8. Has your child received regular health checkups since birth?

   Yes _____ No _____ ___

9. Where does your child receive health care? ___

   _____ none

   _____ pediatrician

   _____ family physician

   _____ clinic

   _____ hospital

   _____ other; Specify _____

10. Has your child had any of the following immunizations?

a. DPT (Diptheria, Whooping Cough, Tetnus)? Yes _____ No _____

Number of shots _____

b. Oral Polio vacine? Yes _____ No _____

Number of doses _____

c. Red Measles (Rubeola) shot? Yes _____ No _____

d. Rubella (German Measles) shot? Yes _____ No _____

e. Where did your child go for most (or all) of the shots that he had so far?

_____ Private physician

_____ Health Department

_____ School Clinic

_____ Other; Specify _____

_____ Has had no shots

11. At what age did your child first have a dental checkup?

age _____; none to this date _____.

12. At what age did your child first have a vision test?

age _____; none to this date _____.

13. At what age did your child first have a hearing test?

age _____; none to this date _____.

14. How long ago did your child have a complete physical exam?

Specify, number of months _____; never _____

b. How long ago was your child seen by a physician?

Specify, number of months _____; never _____

c. What was the purpose of the visit:

sick care _____; what _____

well care _____.

15. Does your child currently have any of the following conditions?

a. Type of problem

(1) hearing problem: Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(2) vision problem; Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(3) speech or language problem; Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(4) physical disability; Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(5) behavior problem; Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(6) social-emotional problem; Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(7) Mental retardation; Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(8) other, specify; _____ Yes _____ No _____ _____

If yes, determined by?

physician _____ teacher _____ parent _____ other _____ _____

(9) If yes, to any of the above, what is the major problem?

_____ _____

b. If yes, to one or more above, answer the following questions:

(1) Have you sought help for your child's problem?

Yes _____ No _____ _____

If yes, where _____ _____

(2) Have special services been provided your child because of this (these) conditions?

Yes _____ No _____ _____

If yes, which one(s) _____ _____

(3) Are additional services desired because of the Child's condition?

Yes _____ No _____ _____

If yes, which one(s) _____ _____

(4) Do you think your child will have difficulty getting along in school?

_____

Yes _____ No _____ 1

16. If you suspected one of the above conditions with your child, where would you go for help?

	Where	Don't Know	
hearing problem	_____	_____	_____
vision problem	_____	_____	_____
speech or language	_____	_____	_____
physical disability	_____	_____	_____
behavior problem	_____	_____	_____
social-emotional	_____	_____	_____
mental retardation	_____	_____	_____

17. Which of the following services would you prefer to have available for your preschool child? (rank choices 1 to 4)

	Normal Child	Child with Identified Problem	
A program for the child at a center for part of the day.	_____	_____	_____
A center where you could learn how to help your child.	_____	_____	_____
Someone who would come to your home to work with your child.	_____	_____	_____
Someone who would come to your home to teach you how to work with your child.	_____	_____	_____
None of the above	_____	_____	_____

18. What sources of information do you use about child development and child rearing?

_____ magazines: which? _____ _____

_____ T.V.; program? _____ _____

_____ friends, neighbors _____

_____ your parents or other relatives _____

_____ books, pamphlets; source? _____ _____

_____ classes, discussion groups; sponsor? _____ _____

_____ doctor, nurse or other medical personnel _____

_____ other, specify _____ _____

_____ none of the above _____

19. If they were made available, which of the following resources for information about child development and child rearing would you prefer? (rank choices 1 to 3)

_____ class; discussion group, seminar _____

_____ booklets or pamphlets for parents _____

_____ T.V. programs for parents _____

NUTRITION

20. Does your child eat at regular times every day? Yes _____ No _____

21. How many times per week does he eat the following foods (at any meal or between meals)?
(circle the appropriate number, specify number greater than 7)

Meat, fish, poultry	0	1	2	3	4	5	6	7	_____
Lunch Meat, hot dogs	0	1	2	3	4	5	6	7	_____
peanut butter	0	1	2	3	4	5	6	7	_____
liver or liver sausage	0	1	2	3	4	5	6	7	_____
eggs	0	1	2	3	4	5	6	7	_____
cheese	0	1	2	3	4	5	6	7	_____
ice cream, pudding, yogart	0	1	2	3	4	5	6	7	_____
fruit, fruit juice	0	1	2	3	4	5	6	7	_____
Potatoes	0	1	2	3	4	5	6	7	_____
Other cooked vegetables	0	1	2	3	4	5	6	7	_____
raw vegetables	0	1	2	3	4	5	6	7	_____
cereal-pre-sweetened	0	1	2	3	4	5	6	7	_____
cereal-other	0	1	2	3	4	5	6	7	_____
Bread	0	1	2	3	4	5	6	7	_____
crackers	0	1	2	3	4	5	6	7	_____
cookies	0	1	2	3	4	5	6	7	_____
pie, cake	0	1	2	3	4	5	6	7	_____
potato chips, corn chips, popcorn	0	1	2	3	4	5	6	7	_____
Candy	0	1	2	3	4	5	6	7	_____
Soft drinks, popsicles, Koolaid	0	1	2	3	4	5	6	7	_____

22. How much milk does your child drink in a 24 hour period?

_____ Less than 2 cups each day

_____ 2 to 4 cups each day

_____ more than 4 cups each day

23. Does your child take a vitamin supplement every day? Yes _____ No _____

If yes, does it contain iron Yes _____ No _____

24. Do you think a child can get all the vitamins he needs every day from foods without taking a vitamin pill?

Yes _____ No _____ Don't Know _____

25. Do you think it is very difficult to find out what is good and what is not good for a child to eat?

Yes _____ No _____ Don't Know _____

2

26. What arrangements do you make for care of your child when the mother (or primary care giver) is out of the home?
(Indicate primary arrangement 1, check additional)

ACTIVITY	IN HOME CARE					OUT OF HOME CARE				
	Takes care of self	Spouse	Brothers or Sisters	Other Relatives	Baby-sitter	Neighbor or babysitter	Relatives	Licensed Day Care Home	Day Care Center	Nursery School or Headstart
Working										
School, training										
Appointments, shopping										
Leisure activities										
Emergencies (illness, hospitalization)										

27. For each child care arrangement, give the following information:

a. while working

frequency (per week) _____ ___ ___

hours (per session) _____ ___ ___

cost (per hour) _____ ___ ___ ___

satisfied with care? Yes ____ No ____ ____

b. during school or training

frequency (per month) _____ ___ ___

hours (per session) _____ ___ ___

cost (per hour) _____ ___ ___ ___

satisfied with care? Yes ____ No ____ ____

c. during appointments, shopping

frequency (per month) _____ ___ ___

hours (per session) _____ ___ ___

cost (per hour) _____ ___ ___ ___

satisfied with care? Yes ____ No ____ ____

d. during leisure activities

frequency (per month) _____ ___ ___

hours (per session) _____ ___ ___

cost (per hour) _____ ___ ___ ___

satisfied with care? Yes ____ No ____ ____

e. In case of emergencies

frequency (per year) _____ ___ ___

hours (per day) _____ ___ ___

cost (per hour) _____ ___ ___ ___

satisfied with care? Yes ____ No ____ ____

28. If you could make satisfactory child care arrangements, would you?

a) go to work Yes _____ No _____

b) go to school Yes _____ No _____

c) other, what? _____ Yes _____ No _____

d) make no change in current activities _____

29. Rank the following (from 1 to 3) in importance to you when you make child care arrangements.

_____ Convenience of the location

_____ Activities for the child

_____ Cost of the care

_____ Qualifications of the caregiver

_____ Hours of the care

30. How important are the following elements of <u>child care</u> in a young child's development (Rank from 1 to 3, the top three in importance)

_____ Supervision, to safeguard against accidents

_____ Planned experiences designed to foster learning

_____ A loving & supportive environment for the child

_____ Provision of basic needs of food, clothing, shelter

_____ Opportunities for interaction with other children

31. On a typical week day, how many hours does your child spend watching T.V.?

_____ under 1 hour; _____ 2 - 3 hours;

_____ 4 - 5 hours; _____ more than 5 hours

What does he/she watch? _____

32. Does your child have experiences playing with other children?

type: formal _____; informal _____; none _____;

where: in-home _____ out-of-home _____

How many hours per day? _____

33. Do you have contact with the following types of programs for children?

a. Family day care home

know about	Yes ____	No ____	____
exists in community	Yes ____	No ____	____
have child enrolled	Yes ____	No ____	____
would like to have child enrolled	Yes ____	No ____	____

b. Day care center

know about	Yes ____	No ____	____
exists in community	Yes ____	No ____	____
have child enrolled	Yes ____	No ____	____
would like to have child enrolled	Yes ____	No ____	____

c. Nursery school

know about	Yes ____	No ____	____
exists in community	Yes ____	No ____	____
have child enrolled	Yes ____	No ____	____
would like to have child enrolled	Yes ____	No ____	____

d. Headstart

know about	Yes ____	No ____	____
exists in community	Yes ____	No ____	____
have child enrolled	Yes ____	No ____	____
would like to have child enrolled	Yes ____	No ____	____

e. Homestart

know about	Yes ____	No ____	____
exists in community	Yes ____	No ____	____
have child enrolled	Yes ____	No ____	____
would like to have child enrolled	Yes ____	No ____	____

f. Day activity center

know about	Yes ____	No ____	____
exists in community	Yes ____	No ____	____
have child enrolled	Yes ____	No ____	____
would like to have child enrolled	Yes ____	No ____	____

Coding

34. Where is your home located?

_____ farm ____

_____ rural, but not a farm

_____ town (population 5,000 or under)

_____ city (population over 5,000)

35. Is transportation a problem in obtaining services? ____

_____ never _____ seldom _____ sometimes _____ always

36. If you had your choice of an ideal child care arrangement what would it be?

_____

_____ ____ ____

_____

37. What kinds of services in your community do you think are most needed for your child?

_____

_____ ____ ____

_____

Comments:

C.C.80 4

APPENDIX A - SAMPLE SELECTION

Sample selection is a technical process that requires strict adherence to a set of procedures in order for a representative sample of families with a child under six to be selected.

Some basic materials that have been helpful in this process are a distribution of the number of children under six by townships as given in the 1970 Census (available as a result of a special run by the Minnesota Analysis Planning System) and county maps showing townships and section boundaries. The percentage of children in each of the townships is calculated and then using that percentage multiplied by the total number of interviews for the county, the number of interviews in each township is computed. Determining exactly where the interview(s) will be made in a particular township requires designation by a random process of a particular section(s) within the township. This process of sample selection works quite well for rural or predominantely rural areas. For towns, maps should be obtained from local sources. The town is then divided into sections using any available information about the population. An example, would be dividing the town in quadrants and/or the distance out from the center of town. For cities and metropolitan areas, census data must be obtained for finer breakdowns such as blocks. Block statistics are available for some of the larger cities. The sampling procedures in cities and metropolitan areas might require a prior selection of representative neighborhoods. Additional technical assistance would be required for appropriate sample selection in such densely populated areas.

APPENDIX B - INTERVIEWER INSTRUCTIONS

Interviewers should feel comfortable talking to all kinds of people. The introduction by the interviewer is particularly important in gaining the respondents cooperation. The interviewer should:

1. Have letter of authorization ready to show the respondent.
2. Tell the respondent who you are and whom you represent.
3. Tell the respondent what you are doing.
4. Tell how the respondent was chosen - that selection was by a random process and is to be representative of a cross-section of the county.
5. Don't ask questions to gain permission for the interview instead say "I would like to come in and talk with you about this." Try to avoid questions which permit negative responses and might lead to refusal to be interviewed. Assume that the interview will be conducted at that moment and make arrangements to return at a different time only if the respondent insists.
6. The confidentially of the responses should be stressed.

The interviewers should be thoroughly familiar with the questions on the survey and with overall purpose of the survey. It is important that the exact wording of the questions be used and the same clarifying information be given to the respondents if any questions need clarifying. A listing of the standard interpretation for some of the questions is given at the end of this section. The intent of the interviews is to gain information; the interviewer should never suggest an answer, hint at how he or she feels about the question. Respondents should be encouraged to answer all questions as non-responses affect the overall results. The interviewer should try to be aware of inconsistencies between responses to two or more questions and try to resolve these contradictions with the respondent.

ABOUT THE SURVEY QUESTIONS:

1) The initial questions are to obtain general bakcground information about the family. The marital status question may be asked in the form "Are you presently married?" The income question is to give total family income from all sources (gross). It can be given within the categories rather than the exact amount. If a weekly or monthly amount is given it should be recalculated and checked with the respondent.

2) The age and six of all children under age 18 living at home is recorded on page 2 of the interview form. The interview is conducted with reference to a particular target child under the age of six. If there is more than one child under the age of six then the interviewer should select the target child by a random process, such as selecting the oldest child, youngest child, or middle child under the age of six in alternate families. Indicate if the child is adopted or is a foster child.

3) The questions regarding maternal health are asked with reference to the particular target child. For instance, "Did the mother attend any prenatal classes?" (for this particular child). The child's birth weight may be recorded to the nearest pound.

4) Efforts should be made to determine the exact number of shots or doses that the child has received for DPT and oral polio. The first part of question 14 refers to a complete physical exam, while part b refers to going to the doctor for any reason whatever.

5) There will not be any problem conditions for many of the target children, in which case "no" should simply be checked. If more than one problem is indicated for a particular child, then the major problem should be indicated in part (9). If only one problem is indicated, that should be repeated in part (9). As a matter of definition for some of the problem conditions, "behavior

problem" refers to discipline or hyperactivity problems among others; and "social-emotional problem" refers to problems of affect such as shyness, being withdrawn, etc.

6) On page 9 of the survey form, the primary child care arrangement for each activity should be indicated by a "1" in each row. (That is, for 1 of the 10 alternatives). Additional arrangements can be indicated by a check (✓).

7) For question 28, "yes" answers should be given only if the respondent is not presently engaging in that activity. This is, part a, is applicable only for those not presently working.

8) Questions 36 and 37 are deliberately "open-ended" questions. Question 36 refers to the ideal arrangement when the mother (or primary care giver) cannot be with the child. If "the present arrangement" is given as the ideal, specify what it is.

APPENDIX C - PUBLICITY

Publicity for the survey should be arranged appropriate to the circumstances of the sponsor of the survey and the local community.

It would be appropriate to have a newspaper release and radio spots right before the interviewing is scheduled to begin. There should also be follow-up reports in the newspapers describing the results of the survey. Examples of a press release and a letter of introduction are included in this section.

Scott-Carver Economic Council, Inc.
Sixth and Oak
CARVER, MINN. 55315
Phone: 448-2302

November 15, 1974

FOR IMMEDIATE RELEASE

The Child Care Coordination Program of the Scott-Carver Economic Council is conducting a comprehensive survey of the needs of young children and families in Carver County.

Approximately 200 families will be selected proportionately throughout the county according to each areas population. Families selected to be interviewed will be notified by mail of their selection.

The following persons have been appointed to an Advisory Committee for the needs assessment: Georgianna Lowney representing Public Health Nursing Services; James Kovaleski, representing public schools; Gedney Tuttle representing business; Zona Brown, representing parent users of child care services; Vicky Peterson, Director of Acorn Acres Nursery School, representing early childhood education programs; Ardelle Golden, representing Carver County Family Service Department and Morris Anderson representing Carver County Commissioners.

Technical Assistance for the survey is being provided by Dr. Gail Roberts of the State Planning Agency. Mary Sullivan, Carver County Child Care Coordinator is coordinating the effort. Lois Flemmer, Kindergarten teacher from Chanhassen Elementary will head the task force of volunteer interviewers.

With full cooperation from the residents of Carver County a true picture of the needs of young children and families in the county will result.

REGION 5 REGIONAL DEVELOPMENT COMMISSION
Robert F. Benner, Executive Director

102 North Sixth Street
Staples, Minnesota 56479

Telephone: (218) 894-3233

May 20, 1975

To whom it may concern:

This is to inform you that the bearer of this letter is participating in a survey of the needs of children in the five-county area of Region 5. Your responses to the questions on the survey will be kept confidential and will be used, along with the responses of other parents in the Region, to get an idea of the needs of our children. We feel that there is no better source of this information than the parents themselves. Your cooperation is greatly appreciated.

The survey results will be used to prepare a study on child needs in Region 5 and make recommendations for improvements if necessary. This information will be of great help to the various agencies dealing with child care issues in the Region.

Thank you again for your assistance.

Sincerely,

R F Benner

Robert F. Benner
Executive Director

RFB/dm

APPENDIX D - CODING OF THE DATA

A copy of the codebook to be used with the survey instrument follows. Coders should be trained and supervised by the survey coordinator in order to insure standardized procedures. A county number and a three digit identification number are assigned to each survey. Coding can be done in the right-hand column of the survey form. The codes should then be transferred to 80-column sheets for ease and accuracy in keypunching. The data should be recorded on the 80-column sheets for all card 1's, card 2's, card 3's, and card 4's using the four digit county and identification number in the first four columns for each card, as shown on the accompanying chart. This will greatly improve accuracy in recording the codes and in keypunching. The punched cards can latter be sorted into case order by using the identification number.

The codebook will also be used during the data analysis phase as a record of the codes, column numbers and variable numbers.

EXAMPLE OF RECORDINGS ON 80-COLUMN SHEETS:

Card 1's

```
Col. 1-4                                                Col. 77    Col. 80
5001 ..................................................1           1
5002 ..................................................2           1
 .
 .
 .
5040 ..................................................1           1
```

Card 2's

```
Col. 1-4                                           Col. 75         Col. 80
5001 ..............................................2                2
5002 ..............................................3                2
 .
 .
 .
5040 ..............................................1                2
```

Card 3's

```
Col. 1-4                              Col. 64                      Col. 80
5001 ..................................1                            3
5002 ..................................1                            3
 .
 .
 .
5040 ..................................1                            3
```

Card 4's

```
Col. 1-4              Col. 50-51                                   Col. 80
5001 ..................03                                           4
5002 ..................04                                           4
 .
 .
 .
5040 ..................01                                           4
```

CHILD DEVELOPMENT NEEDS ASSESSMENT

Var. No.	Question	Column
		1
	County Code Number: (single digit number)	1
	Respondent Code Number (three digit number)	2-4
001	Township: (01-99) See Demographic Breakdowns	5-6
002	Adult Responding: Mother - 1 Other - 4 Father - 2 Both - 3	7
003	Marital Status: Married - 1 Separated - 4 Widowed - 2 Never Married - 5 Divorced - 3	8
004	Mother's Age: 19 or under - 1 20 - 24 - 2 25 - 29 - 3 30 - 34 - 4 35 - 39 - 5 40 - 44 - 6 45 and over - 7	9
005	Mother's Educational Level: Less than 8 years - 1 Some High School - 2 High School (12 yrs) - 3 Some College - 4 College (16 yrs.) - 5 Graduate Study - 6 Vocational - 7	10
006	Mother's Employment: Yes - 1 No - 2	11
007	Mother's Hours: N/A - 9 Less than 15 - 1 16 - 20 - 2 21 - 39 - 3 40 or over - 4	12
008	Father's Age: 19 or under - 1 20 - 24 - 2 25 - 29 - 3 30 - 34 - 4 35 - 39 - 5 40 - 44 - 6 45 and over - 7	13

Var. No.	Question	Column
009	Father's Educational Level: Less than 8 years - 1 Some high school - 2 High School (12 yrs) - 3 Some college - 4 College (16 yrs) - 5 Graduate Study - 6 Vocational - 7	14
010	Father's Employment: Yes - 1 No - 2	15
011	Father's Hours: N/A - 9 Less than 15 - 1 16 - 20 - 2 21 - 39 - 3 40 - 4 Over 40 - 5	16
012	Family Income Under $4,000 - 1 $4,000 - $7,000 - 2 $7,000 - $9,000 - 3 $10,000-$14,999 - 4 Over $15,000 - 5	17
013	Total Number of Children: code direct (9 or over as 9)	18
014	Number of Children under 6: code direct	19
015	Age of Target Child Under 1 - 1 1 - 1.9 - 2 2 - 2.9 - 3 3.- 3.9 - 4 4.- 4.9 - 5 5 - 5.9 - 6 6 - 7	20
016	Sex of target child Female - 1 Male - 2	21
017	Birth order status of target child Oldes or only - 1 Middle - 2 Youngest - 3	22

Var. No.	Question		Column
018	1	Month began prenatal care: 1-3 - 1 7-9 - 3 N/A - 9 4-6 - 2 None- 4	23
019	2	Number of prenatal visits: code direct N/A - 99	24-25
020		b. Where obtained prenatal care: Private physician - 1 Clinic/public health - 2 Other - 3	26
021	3	Prenatal Classes: Yes - 1 No - 2	27
022		How many (code direct) N/A - 9	28
023	4	Baby came at expected time: Yes - 1 No, early - 2 No, late - 3	29
024	5	Difficulties during labor: yes - 1 no - 2	30
025	6	Child's birth weight (round to nearest pound - code direct) (9 or over as 9)	31
026	7	Mother's Age at child's birth 19 or under - 1 20 - 24 - 2 25 - 29 - 3 30 - 34 - 4 35 - 39 - 5 40 - 44 - 6 45 or over - 7	32
027	8	Child has regular checkups: Yes - 1 No - 2	33
028	9	Where child receive health care: None - 1 Pediatrician - 2 Family physician - 3 Clinic - 4 Hospital - 5 Other - 6	34

Var. No.	Question		Column
029	10	Immunizations: a) DPT: Yes - 1 No - 2	35
030		Number of shots: code direct N/A - 9	36
031		b) Oral Polio: Yes - 1 No - 2	37
032		Number of doses: code direct N/A - 9	38
033		c) Red Measles: Yes - 1 No - 2	39
034		d) German Measles: Yes - 1 No - 2	40
035		e) Where child goes for shots: Private physician - 1 Health Dept. - 2 School Clinic - 3 Private Clinic - 4 Mobile Clinic - 5 Other - 6 Had no shots - 9	41
036	11	Dental check-up Yes - 1 No - 2	42
037		Age at first checkup (code direct) N/A - 9	43
038	12	Vision test Yes - 1 No - 2	44
039		Age at first test (code direct) N/A - 9	45
040	13	Hearing test Yes - 1 No - 2	46
041		Age at first test (code direct) N/A - 9	47
042	14	How long ago physical exam (months) Never - 9 1 - 6 months - 1 7 - 12 months - 2 13 - 24 months - 3 25 - 36 months - 4 More than 36 months - 5	48

Var. No.	Question		Column
043		b) How long age seen by physician (months) Never - 9 1 - 6 months - 1 7 - 12 months - 2 13 - 24 months - 3 25 - 36 months - 4 More than 36 months - 5	49
044		c) Purpose of visit Sick care - 1 Well care - 2	50
045	15	a) Conditions/Problems 1) Hearing: Yes - 1 No - 2	51
046		Determined by: Doctor - 1, Parent - 3, Teacher - 2, Other - 4, Blank (N/A) - 9	52
047		2) Vision: Yes - 1 No - 2	53
048		Determined by: Doctor - 1, Parent - 3, Teacher - 2, Other - 4, Blank (N/A) - 9	54
049		3) Speech/Language: Yes - 1 No - 2	55
050		Determined by: Doctor - 1, Parent - 3, Teacher - 2, Other - 4, Blank (N/A) - 9	56
051		4) Physical disability: Yes - 1 No - 2	57
052		Determined by: Doctor - 1, Parent - 3, Teacher - 2, Other - 4, Blank (N/A) - 9	58
053		5) Behavior: Yes - 1 No - 2	59
054		Determined by: Doctor - 1, Parent - 3, Teacher -2, Other - 4, Blank (N/A) - 9	60
055		6) Social/Emotion: Yes - 1 No - 2	61
056		Determined by: Doctor - 1, Parent - 3, Teacher - 2, Other - 4, Blank (N/A) - 9	62
057		7) Mental retardation: Yes - 1 No - 2	63
058		Determined by: Doctor - 1, Parent - 3, Teacher - 2, Other - 4, Blank (N/A) - 9	64

Var. No.	Question			Column
059	8) Other: Yes - 1 No - 2			65
060	Determined by: Doctor - 1 Teacher - 2	Parent - 3 Other - 4 Blank (N/A) - 9		66
061	9) If Yes, to any of the above: Hearing problem - 1 Vision problem - 2 Speech, language - 3 Physical disability - 4 Behavior problem - 5	Social-emotional - 6 Mental retardation - 7 Others - 8 N/A - 9		67
062	b) 1) If yes, sought help? Yes - 1 No - 2 N/A - 9			68
063	Where?			69-70
	physician	- 01		
	therapist/speech path.	- 02		
	Mental Health Clinic	- 03		
	Psychologist	- 04		
	Eye Clinic	- 05		
	Crippled Children's Clinic	- 06		
	Schools	- 07		
	Other	- 08		
	None	- 09		
	N/A	- 99		
064	2) Services provided? Yes - 1 No - 2 N/A - 9			71
065	Which ones?			72-73
	Medical care, medication	- 01		
	surgery	- 02		
	Therapy (speech, physical, psychological)	- 03		
	testing, evaluation	- 04		
	corrective lenses	- 05		
	corrective shoes	- 06		
	special education	- 07		
	other	- 08		
	None	- 10		
	N/A	- 99		
066	3) Additional services desired? Yes - 1 No - 2 N/A - 9			74
067	Which one?			75-76
	Medical care	- 01		
	Surgery	- 02		

Var. No.	Question	Column
	Therapy - 03 Testing, Evaluation - 04 Corrective lenses - 05 Corrective shoes - 06 Special education - 07 Other - 08 None - 09 N/A - 99	
068	4) Will child have difficulty in school? Yes - 1 No - 2 N/A - 9	77
	End of Card #1 - Code 1	80

Card #2 - County and respondent Code Same as Card #1 1-4

Var. No.	Question		Column
069	16	If suspected difficulties: 1) Hearing: Physician - 1 School - 3 Audiologist - 2 Don't know - 8	5
070		2) Vision: Physician - 1 School - 3 Optamologist - 2 Don't know - 8	6
071		3) Speech/Language: Physician - 1 School - 3 Speech Therapist - 2 Don't know - 8	7
072		4) Physical disability: Physician - 1 School - 3 Crippled Children Clinic 2 Don't know - 8	8
073		5) Behavior: Physician - 1 School - 3 Psychologist - 2 Mental Health Clinic - 4 Don't know - 8	9
074		6) Soc./Emot.: Physician - 1 School - 3 Psychologist - 2 Mental Health Clinic - 4 Don't know - 8	10
075		7) Mental retard.: Physician - 1 School - 3 Mental Health Clinic - 2 Don't know - 9	11
076		BLANK	12
	17	Type of service preferred First, second, third, fourth choice for normal 1-4 First, second, third, fourth choice for problem 5-8	
077		preschool center	13
078		parent center	14
079		In-Home tutor	15
080		Mother in home	16
081		None of the above Normal - 1 Problem - 2 N/A - 9	17
082	18	Information sources for child development: Magazines: none - blank Good Housekeeping - 6 Check not specify - 1 Readers Digest - 7 Parent - 2 McCalls - 8 American Baby - 3 New Mother Newsweek - 4 or other - 9 Redbook - 5	18
083		TV: None - blank Cptn. Kangaroo - 3 Check not specify - 1 Education TV - 4 Specials - 2 Sesame Street - 5	19
084		Friends, neighbors: None - blank Check - 1	20

Var. No.	Question		Column
085		Parents & relatives: None - blank Check - 1	21
086		Books & Pamphlets: None - blank Check - 1	22
087		Classes, discussion: None - blank Check - 1	23
088		Doctors, Nurses: None - blank Check - 1	24
089		Other: Experience - 1 School - 2 Minister/priest - 3 Women's organization - 4 Adoption Agency - 5 None - Blank	25
090		None of the above: Check - 1	26
	19	Other resources preferred - Code 1-3, not check, blank	
091		Classes	27
092		Booklets	28
093		TV	29
094	20	Eat at regular times Yes - 1 No - 2	30
	21	Number of times per week child eats - code direct If 0 is circled, code 0; if nothing circled - blank	
095		Meat, fish, poultry	31-32
096		Lunch meat, hot doges	33-34
097		peanut butter	35-36
098		liver or liver sausage	37-38
099		eggs	39-40
100		cheese	41-42
101		ice cream, pudding yogart	43-44
102		fruit, fruit juice	45-46
103		potatoes	47-48
104		other cooked vegetables	49-50
105		raw vegetables	51-52
106		cereal - presweetened	53-54
107		cereal - other	55-56
108		bread	57-58
109		crackers	59-60
110		cookies	61-62
111		pie, cake	63-64
112		potato chips, corn chips, popcorn	65-66
113		candy	67-68
114		soft dranks, popsicles, koolaid	69-70
115	22	How much milk Less than 2 cups - 1 2 to 4 cups - 2 more than 4 cups - 3	71
116	23	Vitamins Yes - 1 No - 2	72

Var. No.	Question		Column
117		Contain iron Yes - 1 No - 2 N/A - 9	73
118	24	Get vitamins without pills Yes - 1 No - 2 Don't know - 3	74
119	25	Information on whats good Yes - 1 No - 2 Don't know - 3	75
		End of card #2 - code 2 in column	80

Var. No.	Question	Column
Card # 3 -	County and respondent code same as Card #1 and 2	1-4
120	26 Child care arrangements: 1) Working: N/A - 9 Out of home - 2 In home - 1 Both - 3	5
121	Child care arrangements continued: Self - 01 Neighbor - 06 Spouse - 02 Relative - 07 Sibling - 03 Lic. Day Care Home - 08 Other relatives - 04 Day Care Center - 09 Babysitter - 05 Nursery School/Headstart - 10	6-7
122	2) School, training: N/A - 9 Out of home - 2 In home - 1 Both - 3	8
123	Self - 01 Neighbor - 06 Spouse - 02 Relative - 07 Sibling - 03 Lic. Day Care Home - 08 Other relatives - 04 Day Care Center - 09 Babysitter - 05 Nursery School/Headstart - 10	9-10
124	3) Appts., shopping: N/A - 9 Out of home - 2 In home - 1 Both - 3	11
125	Self - 01 Neighbor - 06 Spouse - 02 Relative - 07 Sibling - 03 Lic. Day Care Home - 08 Other relative - 04 Day Care Center - 09 Babysitter - 05 Nursery School/Headstart - 10	12-13
126	4) Leisure: N/A - 9 Out of home - 2 In home - 1 Both - 3	14
127	Self - 01 Neighbor - 06 Spouse - 02 Relative - 07 Sibling - 03 Lic. Day Care Home - 08 Other relative - 04 Day Care Center - 09 Babysitter - 05 Nursery School/Headstart - 10	15-16
128	5) Emergencies: N/A - 9 Out of home - 2 In home - 1 Both - 3	17
129	Self - 01 Neighbor - 06 Spouse - 02 Relative - 07 Sibling - 03 Lic. Day Care Home - 08 Other relative - 04 Day Care Center - 09 Babysitter - 05 Nursery School/Headstart - 10	18-19

Var. No.	Question	Column
	27 Child Care Arrangements:	
	1) Work	
130	Frequency (per/wk) - code direct - N/A 99	20-21
131	Hours (per/session) code direct - N/A 99	22-23
132	Cost (per/hr) - code direct - N/A 999	24-26
133	Satisfaction: Yes - 1 No - 2 N/A - 9	27
	2) School	
134	Frequency (per/month) - code direct N/A - 99	28-29
135	Hours (per/session) - code direct N/A - 99	30-31
136	Cost - code direct N/A - 999	32-34
137	Satisfaction Yes - 1 No - 2 N/A - 9	35
	3) Appointments	
138	Frequency (per/month) code directo N/A - 99	36-37
139	Hours (per/session) - code direct N/A - 99	38-39
140	Cost - code direct N/A - 999	40-42
141	Satisfaction Yes - 1 No - 2 N/A - 9	43
	4) Leisure	
142	Frequency (per/Mo) - code direct N/A - 9	44-45
143	Hours (per/session) - code direct N/A - 9	46-47
144	Cost - code direct N/A - 9	48-50
145	Satisfaction Yes - 1 No - 2 N/A - 9	51
	5) Emergencies	
146	Frequencies (per/yr) - code direct N/A - 9	52-53
147	Hours (per/day) code direct N/A - 9	54-55
148	Cost - code direct N/A - 9	56-58
149	Satisfaction: Yes - 1 No - 2 N/A - 9	59
	28 Satisfactory arrangements:	
150	a) Go to work: Yes - 1 No - 2 N/A - 9	60
151	b) Go to school: Yes - 1 No - 2 N/A - 9	61
152	c) Other: Yes - 1 No - 2 N/A - 9	62
153	What: Recreation - 1 Go out more - 2 Volunteer work - 3 Adult education - 4	63
154	d) Make no changes - if checkcd - 1	64
	End of Card #3 - code 3 in column	80

Var. No.	Question	Column
Card #4 -	County and respondent code same as Card #1, 2, 3	1-4
	29 Importance of child care - code 1-3, no checked - blank	
155	Convenience	5
156	Activities	6
157	Cost	7
158	Qualifications	8
159	Hours	9
	30 Important Elements: code 1- 3, not checked - blank	
160	Supervision	10
161	Planned experience	11
162	Loving environment	12
163	Basic needs	13
164	Interaction	14
165	31 Hours spent watching TV daily: less than 1 hour - 1 2 - 3 hours - 2 4 - 5 hours - 3 more than 5 hrs. - 4	15
166	What is watched: Cptn Kangaroo - 01; Mr. Rogerts - 05 Cartoons - 02; Commercials - 06 Wild Kingdom - 03; Quiz/Game - 07 Sesame St. - 04; Family shows - 08 N/A - 99; Disney - 09	16-17
167	32 Play experience: Type: formal - 1; Informal - 2 both - 3; None - 9	18
168	Where: In home - 1; Out of home - 2 both - 3; N/A - 9	19
169	How many hours: code direct (less than 1 hour/day - 88 N/A - 99	20-21
	33 Programs for children:	
170	a) Family Day Care: Know about? Yes - 1 No - 2	22
171	Exists in community? Yes - 1 No - 2	23
172	Have child enrolled? Yes - 1 No - 2	24
173	Would like to have child enrolled? Yes - 1 No - 2	25
	b) Day care Center:	
174	Know about? Yes - 1 No - 2	26
175	Exists in community? Yes - 1 No - 2	27
176	Have child enrolled? Yes - 1 No - 2	28
177	Would like to have child enrolled? Yes - 1 No - 2	29
	c) Nursery school:	
178	Know about? Yes - 1 No - 2	30
179	Exists in community? Yes - 1 No - 2	31
180	Have child enrolled? Yes - 1 No - ?	32
181	Would like to have child enrolled? Yes - 1 No - 2	33
	d) Headstart:	
182	Know about? Yes - 1 No - 2	34
183	Exists in Community? Yes -1 No - 2	35
184	Have Child enrolled? Yes - 1 No - 2	36
185	Would like to have child enrolled? Yes - 1 No - 2	37

Var. No.	Question		Column
		d) Homestart:	
186		Know about? Yes - 1 No - 2	38
187		Exists in community? Yes - 1 No - 2	39
188		Have child enrolled? Yes - 1 No - 2	40
189		Would like to have child enrolled? Yes - 1 No - 2	41
		e) Day Activity Center	
190		Know about? Yes - 1 No - 2	42
191		Exists in community? Yes - 1 No - 2	43
192		Have child enrolled? Yes - 1 No - 2	44
193		Would like to have child enrolled? Yes - 1 No - 2	45
194	34	Where is you home located?	46
		farm - 1	
		rural, non-farm - 2	
		town - 3	
		city - 4	
195	35	Is transportation a problem?	47
		Never - 1	
		seldom - 2	
		sometimes - 3	
		always - 4	
196	36	Ideal child care arrangement:	48-49
		Mother in home - 01	
		babysitter in home - 02	
		relative in home - 03	
		siblings or spouse - 04	
		day care center - 05	
		nursery school - 06	
		Headstart/Homestart - 07	
		Family day care home - 08	
		babysitter's home - 09	
		relative's home - 10	
		babysitting cooperative - 11	
		neighbor's home - 12	
197	37	Kinds of services needed	50-51
		Nursery school - 01	
		day care - 02	
		Headstart - 03	
		Parks/recreation - 04	
		summer program - 05	
		play group - 06	
		sitter service - 07	
		library - 08	
		health services - 09	
		parent education - 10	
		public school program - 11	
		Nothing - 50	
		don't know - 88	
	End of Card #4 - code 4 in column		80

APPENDIX E - ANALYSIS OF THE DATA

The analysis of the data can be most easily done using the SPSS (Statistical Package for the Social Sciences) system which is available through many computing centers. The SPSS system is designed in order to allow the user to perform many different types of data analysis in a simple and convenient manner. A 1970 McGraw Hill, Inc. publication, Statistical Package for the Social Sciences by Nie, Bent and Hill is a complete instructional guide to the SPSS system. The following description is provided to facilitate the processing of the needs assessment data by someone who has general familiarity with computer processing.

The first step in using the SPSS system, is to prepare control cards. The user should always check with the computer center where the data is to be processed for any special procedures for the use of the SPSS system at that particular center. There usually is a consultant nearby who will aid the user in revising the format.

In order to enter the computer system, a combination of job cards must be submitted. Job name, computing time, account number and name of system to be used are often included on these cards. Because each computing center calls for variations in format, the user should determine the format for the particular computing center.

All SPSS control cards have two portions: 1) a control field which occupies card columns 1 to 15 and contains the control word or words which identify the card to both the user and the system; and 2) the specification field occupying card columns 16 to 80 of that and all subsequent cards necessary to complete the specifications and containing the parameters and arguments requested by the particular control card being used.

Information is entered into SPSS by means of the data-definition control cards.

1. The RUN NAME card identifies the current computer run, and the user-supplied name which follows the control words RUN NAME is printed at the top of each page of output generated on that run. The label may be up to 64 characters in length and may contain any of the valid characters in the IBM 360 character set. The card has the following format:

```
1           16
RUN NAME    THIS IS AN EXAMPLE RUN LABEL
```

2. The VARIABLE LIST control card causes these variable names to be entered into the system and associated with the proper variables on the cases. A maximum of 500 variables may be defined for any given file. The variable-naming convention can become tedious in cases where a large number of variables must be declared. In these cases a procedure can be employed which requires much less card preparation. This convention identifies variables by means of variable-sequence numbers, and a large string of variables can be defined by the following type of inclusive variable list, VAR001 to VAR200.

Using this inclusive-naming convention, the variables VAR001, VAR002, VAR003, ..., VAR100 would all be defined by the following VARIABLE LIST card:

```
1                   16
VARIABLE LIST       VAR001 to VAR100
```

The implied intervening variable names (in this case VAR002 to VAR099) will be automatically generated by the system and associated with the proper variables.

3. The NO. OF CASES card simply informs the system of the number of cases in the user's file. It would appear as such:

```
1                   16
NO. OF CASES        Number of cases in file
```

4. The INPUT MEDIUM card serves the purpose of informing the SPSS system of the type of input <u>medium</u> from which the user's data will be entered into the system, such as cards, tape or file. It would appear as such:

```
1                   16
INPUT MEDIUM        FILE (or name of FILE)
```

5. Three further types of information describing the data are required before a file may be input to the SPSS system: 1) the organization of the data cases, that is, whether they are organized in a fixed-column or free-field; 2) the type of variables, that is, whether they are numeric or alphanumeric variables; and 3) the card and column location of the variables. These three types of information are entered on the INPUT FORMAT card.

The first element entered onto the specification field of the INPUT FORMAT card will be the keyword, FIXED. The keyword FIXED is followed by a format list giving the type and location of the variables on the cases.

The format list provides the system with a set of instructions for reading the user's data. The format list consists of series of elements enclosed in parentheses. The left parenthesis indicates the beginning of the format list, and the right parenthesis indicates the end of the list. The format list directly follows the keyword FIXED and may be continued in columns 16 to 80 of succeeding cards if it cannot be completed on the remainder of the initial card. The elements most commonly used are:

F-type variables--For variables which are totally composed of numeric values. The element indicating that a variable is numeric is Fw.d. where F indicates that the variable is numeric, w indicates the column width of the variable, and d is the number of digits or columns to the right of the deciminal point.

Skipping card columns with the x--The element nX enables the user to skip blanks or undesired columns on his data cards. The alphabetic character X directs the system to skp the number of columns specified in n.

The slash (/) is used to indicate a next card in the case.

EXAMPLE (Fixed Format)

```
1                       16
INPUT FORMAT            FIXED (10X,5F1.0,2X,3F2.0,12X,45F1.0/10X,25F1.0,2X,F3.0)
```

The above format will instruct the system to enter the data from each case as follows:

1. Skip the first 10 columns of the first card of each case.
2. Read 5 single-column numeric variables.
3. Skip 2 columns.
4. Read 3 two-column numeric variables
5. Skip 12 columns.
6. Read 45 single-column numeric variables.
7. Go to the second card of the case.
8. Skip the first 10 columns of that card.
9. Read 25 single-column numeric variables.
10. Skip 2 columns.
11. Read one 3-column numeric variable.
12. Repeat 1 to 11 for each data case in the file.

6. Very often in social research some of the cases in a file do not have complete information for every variable. For this reason, the SPSS system enables the user to specify missing values for each of the variables so that files containing cases with incomplete data may still be conveniently processed.

When the number of cards is over 300, it is best to make the data into a file. This can be accomplished easily. Although the user should check the procedure with the particular computing center. GET, (file name) card will be included in the initial job cards portion of the deck.

The data definition cards are all grouped together and are placed immediately after the optional RUN NAME card.

The first procedure card (e.g. CODEBOOK) follows the data definition cards. The READ INPUT DATA follows next. If a second set of task definition cards are to be included, then these follow the READ INPUT DATA card (this is the order when using a file, however, when using cards, additional task definition cards follow DATA cards).

Two examples of the card order and the deck set-up follow:

Example 1:

```
1                                   16
RUN                                 CARVER COUNTY CHILD DEVELOPMENT NEEDS SURVEY
VARIABLE LIST                       ID, VAR001 to VAR068
INPUT MEDIUM                        CARD
NO. OF CARDS                        200
INPUT FORMAT                        FIXED (1X,F3.0,F2.0,17F1.0,F2.0,43F1.0,
                                    F2.0,F1.0,F2.0,F1.0,F2.0,F1.0)
CODEBOOK                            ALL
READ INPUT DATA

                    (INSERT CARDS HERE)
FINISH
```

Example 2:

```
1                                   16
RUN NAME                            REGION FIVE CHILD DEVELOPMENT NEEDS SURVEY
VARIABLE LIST                       ID, VAR001 to VAR197
SUBFILE LIST                        CARDS, CROW, MORRISON, TODD, WADENA
NO. OF CASES                        34, 97, 97, 58, 42
INPUT FORMAT                        FIXED (1X,F3.0,F2.0,17F1.0,F2.0,43F1.0,
                                    F2.0,F1.0,F2.0,F1.0,F2.0,F1.0/ 4X,26F1.0,
                                    20F2.0,5F1.0/4X,F1.0,F2.0,F1.0,F2.0,F1.0,
                                    F2.0,F1.0,F2.0,F1.0,3F2.0,F3.0,F1.0,
                                    2F2.0,F3.0,F1.0,2F2.0,F3.0,F1.0,2F1.0,
                                    F3.0,F1.0,2F2.0,F3.0,6F1.0/4X,11F1.0,
                                    F2.0,2F1.0,F2.0,26F1.0,2F2.0)
CROSSTABS                           SUBFIL BY VAR002 to VAR197
READ INPUT DATA
FINISH
```

Additional cards that may be used include VAR LABELS, VALUE LABELS, MISSING VALUES, RECODE AND COMPUTE CARDS. These cards would always be placed before the procedure card (e.g. CROSSTABS).

Variable labels and value labels are easily prepared as follows:

```
1                                   16
VAR LABELS                          VAR002, ADULT RESPONDING/VAR003, MARITAL
                                    STATUS/VAR004, MOTHERS AGE/

VALUE LABLES                        VAR194 (1) RURAL (2) NONRURAL/ VAR015
                                    (1) UNDER 2 (2) 2 to 3.9 (3) 4 to 6/
```

Values to be designated as missing are defined by the MISSING VALUES card. The MISSING VALUES card contains the control words MISSING VALUES followed by the variable list for which one to three missing values are to be declared. An example of the use of the MISSING VALUES card is:

```
1                                   16
MISSING VALUES                      VAR002 to VAR012 (BLANK,9,8)/ VAR015 to
                                    VAR018 (BLANK,9,8)/ VAR019, VAR063,
                                    VAR065 (BLANK,99,88)
```

The RECODE card enables the user to recode any or all the variables in the file so that one, some or all of the values of the variables are replaced by a new value or set of values. The RECODE card contains the control word followed by a variable name or list of variable names for which one set of recoding specifications are to apply. The variable name or list of variable names is in turn followed by the recoding specifications.

An example of the use of the RECODE card is:

```
1                                   16
RECODE                              VAR015 (1,2=1)(3,4=2) (5,6,7=3)/VAR194
                                    (1,2=1) (3,4=2)/VAR196 (01,03,10=3)
                                    (02,09,13=2) (08,05,06,07=3)
```

The COMPUTE card can also be very useful for re-defining variables. The COMPUTE card contains the control word followed by a new variable name and the list of variables to be manipulated. An example of the use of the COMPUTE card is:

```
1                                   16
COMPUTE                             PROTEIN = VAR095 + VAR096 + VAR097 +
                                    VAR098 + VAR099
```

A combination of these cards can be used for processing the nutrition variables.

```
1                                   16
RECODE                              VAR115 (1=7) (2=21) (3=35)
COMPUTE                             PROTEIN = VAR095 + VAR096 + VAR097 +
                                    VAR098 + VAR099
COMPUTE                             VEGAFRU = VAR102 + VAR103 + VAR104 + VAR105
COMPUTE                             CEREAL = VAR106 + VAR107 + VAR108 + VAR109
COMPUTE                             SWEETS = VAR110 + VAR111 + VAR112 + VAR113 +
                                    VAR114
COMPUTE                             DAIRY = VAR100 + VAR101
COMPUTE                             MILK = VAR115 + VAR100 + VAR101
RECODE                              PROTEIN, VEGAFRU, CEREAL, SWEETS, DAIRY,
                                    MILK (0 THRU 13=1) (14 THRU 20=2)
                                    (21 THRU 27=3) (28 THRU 34=4) (35 THRU 41=5)
                                    (42 THRU HIGHEST=6)
```

Reference should be made to the SPSS instructional guide for additional information.

The first step in the analysis of the data is to examine a frequency distribution of the responses. One can obtain a frequency distribution by inserting a CODEBOOK card into the deck as described earlier. The first time a frequency distribution is run it is best not to include a MISSING VALUES card or do any recoding. The result of such a frequency distribution will be a completing listing of the responses. Through examination of the frequency distribution, it will be possible to find dominant trends and the exact number of replies to each category including not applicable and no answers. Because it will be necessary to refer to the exact distribution later on in the analysis, it is very important to make a CODEBOOK. It may be desirable to type the data in the CODEBOOK so that reference to each variable is easy. Each variable and value should be well defined. Here are some examples of variables and frequencies from a CODEBOOK.

Example 1: Adult Responding

	N	%
Mother	185	92.5
Father	6	3.0
Both	9	4.5

Example 2: Mother's Age

	N	%
19 or under	5	2.5
20-24	25	12.5
25-29	67	33.5
30-34	57	28.4
35-39	31	15.5
40-44	9	4.5
45 and over	3	1.5
No response	3	1.5

Example 3: While Working, Child Cared for By

	N	%
Spouse	7	3.5
Sibling	1	.5
Relatives	23	11.5
Babysitter	19	9.5
Neighbor	22	11.0
Licensed Home	1	.5
Nursery School	3	1.5
Day Care Center	4	2.0
Not Applicable	120	60.0

The tables may be too detailed for some variables. Variables can be recoded or data combined in the tables into broader categories. Values that were no answers or not applicable can be removed and percents recalculated. These manipulations can be done by hand or by machine. It is especially necessary to recode if one wishes to do crosstabulations. Tables that have more than 7 cells by 7 cells become nearly impossible to read and make inferences from. For example, it would not be necessary to recode Example 1. In Example 2, recoding would be helpful. One could break down such a table in several ways depending on the purpose. In the process of simplifying tables, values which were left blank or whose answers were unapplicable can be automatically excluded by listing such values on the MISSING VALUES card. An example might be:

Mothers Age

	N	%
19 or under	5	2.5
20-24	25	12.7
25-34	124	63.0
35-39	31	15.7
40 and over	12	6.1
Total	197	100%

No response 3

In combining categories, caution must be taken not to cover up any prominent trends. This might occur accidently if the categories become too broad or if the divisions are inaccurately divided. Such actions might result in deceptive figures or important factors remaining hidden. It is probably better to err on the side of too many categories which can be recombined manually.

It is a good idea to make tables from the printouts soon after the printout is back, rather than running a series of frequencies and crosstabs. The reason for this is manifold. One becomes acquainted with the data by examining the frequency distribution and constructing tables. As one obtains a good grasp of the material, the analysis becomes easier. It also facilities the selection of variables for cross tabulations. If one processes too much data without carefully examining it, one is often faced with an overwhelming mass of meaningless tables and numbers. Making inferences from such tables becomes difficult and errors may go undetected. It is important to "know where you are at" during all phases of the analysis.

APPENDIX F - REPORT PREPARATION

It is possible to prepare a preliminary report directly from the data contained in the frequency distribution. Included in such a report might be characteristics of the family, and descriptions of areas such as Maternal Health, Child Health, Parents Employment, Child Care Arrangements and Nutrition.

It is necessary to examine the basic sample statistics in comparison to the basic population statistics. The purpose of such an examination is to find how closely those sampled resemble the general population. If the sample has been randomly selected then the statistics should be similar. If this is the case, it is then possible to generalize about the population from the sample. Population statistics are obtained from various sources of census data. For the Child Development Needs Assessment analysis, family income, marital status, mothers educational level, fathers educational level, mothers employment status, and fathers employment status are helpful indicators of the population composition. In order to assess the health of the general population certain health statistics should also be studied. Among others, those relevant to the Child Development Needs Assessment are percent of mothers who began prenatal care during the 3rd trimester or never, prenatal care visits median, mother's age, mother's education and child birth weight. Population characteristics for Minnesota counties can be found in Minnesota Socio-Economic Characteristics, Volumes 1-3 (this includes income, employment and education and general characteristics), State of Minnesota Pocket Data Book, Minnesota Department of Health Vital Statistics and in other forms of statistical data.

The simplest method to display statistics is in the form of a table. For example, the comparisons mentioned above between survey results and the population characteristics, would appear as such:

TABLE 1 COMPARISON OF FAMILY CHARACTERISTICS WITH 1970 CENSUS DATA

	Sample	Census
Family Income		
Less than 7,000	11.0%	13.3%
7-9,000	20.7	19.7
10-14,999	45.1	47.0
Over 15,000	22.0	20.9
Marital Status		
Husband-wife families	97.0	95.2
Mother's Educational Level		
Less than 12 yrs.	16.5	29.9
High School (12 yrs.)	39.5	45.9
More than 12 yrs.	41.5	24.2
Mother's Employment Status	33.8	31.5
Father's Employment Status	96.9	96.6

It is essential that the source of all census data be documented. Be sure to footnote all data. Sometimes, census data will not have the same categories as those used in the survey. When this problem is encountered, one may find it necessary to adjust the categories of characteristics in order that a comparison can be conducted.

Frequency distributions display the general tendencies of the data, however, they offer no explanations. Oftentimes data can be explained by crosstabulations. A crosstabulation is basicaly a joint frequency distribution of cases according to two or more variables.*

The nature of cross tabulation can perhaps be best illustrated by a typical example of such an analysis and a hypothesis concerning the results. The most basic form of cross tabulation is the 2 x 2 table. Consider a study which hypothesizes that the frequency of low-income individuals with low educational level is considerably greater than the frequency of high income individuals with low educational levels. This would be tested by the following 2 x 2 table. Assume 100 cases.

* This type of analysis can be done with SPSS by using the CROSSTABS card.

	High Education	Low Education
High Income	30	20
Low Income	20	30

Through the cross tabulation table it is possible to examine the relationship between the variables and determine whether or not a significant relationship exists and if the hypothesis is upheld.

Comparing variables through cross tabulation analysis has proven to be a useful means of analyzing the data collected with child development needs surveys. For example, a frequency distribution reveals that a large number of children are not getting proper health care. One wants to know who these children are, where they come from, and what factors contribute to their conditions. Variables must be selected for cross tabulation. Usually one will begin by comparing the more obvious characteristics such as age of child, family income, urban or rural residence, and mother's educational level.

Examination of such tables might reveal significant relationships. One may find a greater percentage of rural dwellers in need of health care or a greater number of low income families with children under 6 lacking adequate health care. It is not possible to determine causal relationships from such an analysis. However, one can often speculate about a causal relationship using additional information.

The following can be used as a guide for selection of areas for analysis and for organization of the report. A combination of data from the frequency distribution and cross tabulation tables is particularly informative and useful in describing relationships between variables.

	TOPICS	
Family characteristics	Nutrition	Child Care
Maternal Health	special problems	Services Desired
Child Health	Educational Services	

TABLES TO BE PREPARED

Family Characteristics

* Comparison of family characteristics of sample with 1970 Census Data
* Minnesota health statistics compared to survey findings
* Characteristics of children
* Characteristics of target child

Maternal Health

* Maternal health characteristics

  Prenatal classes by birth order

Child Health

* Child health characteristics

  Health care by age of child, income, residence

  Number of DPT shots by age

  Number of polio shots by age

Nutrition

  Average number of servings per day from basic food groups

  Amount of milk consumed by age of child

Special Problems

* Problem conditions
* Source of help for problems

Educational Services

* Services preferred for preschool child

  Services preferred by age of child, residence

* Information sources on child rearing
* Preferred sources of information on child rearing

Child Care

* Child care arrangements (in home/out-of-home)

  Child care arrangements by mothers employment

  Mother's employment by age of child

  Mother's employment by town and rural

  Mother's employment by number of children under six

  Mother's employment by number of children

  Mother's employment by income

  Mother's employment by satisfactory arrangement would go to work?

* Ideal child care arrangements

  Ideal child care arrangements by mother's employment

  Ideal child care arrangements by actual child care arrangements

* Importance when making child care arrangements

* Important elements of child care

  Child care arrangement by work status for rural and towns

Services Desired

* Services community needs

* Knowledge of programs

---

* indicates available from frequency distribution